

FORM
5A

Rev
02/08

State of Colorado

Oil and Gas Conservation Commission

1120 Lincoln Street, Suite 801, Denver, Colorado 80205 Phone: (303) 894-2100 Fax: (303) 894-2109



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Document Number:

400275615

Date Received:

COMPLETED INTERVAL REPORT

The completed interval Report, Form 5A, shall be submitted within thirty (30) days of completing a formation (successful or not), when a formation is temporarily abandoned or permanently abandoned, for a recompletion, reperforation or restimulation, or when a formation is commingled. Fill out a section for each formation. Attach as many pages as required to fully describe the work. List in order of completion.

1. OGCC Operator Number: 66571

4. Contact Name: Joan Proulx

2. Name of Operator: OXY USA WTP LP

Phone: (970) 263-3641

3. Address: P O BOX 27757

Fax: (970) 263-3694

City: HOUSTON State: TX Zip: 77227

5. API Number 05-045-15136-00

6. County: GARFIELD

7. Well Name: CASCADE CREEK

Well Number: 697-09-44B

8. Location: QtrQtr: SWSE Section: 9 Township: 6S

Range: 97W Meridian: 6

9. Field Name: GRAND VALLEY Field Code: 31290

Completed Interval

FORMATION: COZZETTE Status: PLUGGED AND ABANDONED

Treatment Date: 10/09/2009 Date of First Production this formation: 01/06/2010

Perforations Top: 8989 Bottom: 9183 No. Holes: 24 Hole size: 36/100

Provide a brief summary of the formation treatment: Open Hole: ☐

1 stage of slickwater frac with 4,303 bbls of frac fluid and 160,922 lbs of 20/40 white sand proppant

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: 01/10/2010 Hours: 24 Bbls oil: 0 Mcf Gas: 252 Bbls H2O: 0

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 252 Bbls H2O: 0 GOR: 0

Test Method: Flowing Casing PSI: 1688 Tubing PSI: 1239 Choke Size: 24/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1361 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 8063 Tbg setting date: 10/19/2010 Packer Depth: _____

Reason for Non-Production:

Well was repaired for a post-completion tubing restriction; as a result the Cozzette formation was abandoned.

Date formation Abandoned: 10/21/2010 Squeeze: ☐ Yes ☒ No If yes, number of sacks cmt _____

Bridge Plug Depth: 8745 Sacks cement on top: 2

FORMATION: WILLIAMS FORK - CAMEO Status: PRODUCING

Treatment Date: 12/13/2011 Date of First Production this formation: 01/06/2010

Perforations Top: 6846 Bottom: 7044 No. Holes: 33 Hole size: 35/100

Provide a brief summary of the formation treatment: Open Hole: ☐

1 stage of slickwater frac with 4,925 bbls of frac fluid and 191,957 lbs of white sand proppant

This formation is commingled with another formation: ☐ Yes ☒ No

Test Information:

Date: 04/23/2012 Hours: 24 Bbls oil: 0 Mcf Gas: 0 Bbls H2O: 2

Calculated 24 hour rate: Bbls oil: 0 Mcf Gas: 0 Bbls H2O: 2 GOR: 0

Test Method: Flowing Casing PSI: 237 Tubing PSI: 6 Choke Size: 48/64

Gas Disposition: SOLD Gas Type: DRY BTU Gas: 1072 API Gravity Oil: 0

Tubing Size: 2 + 3/8 Tubing Setting Depth: 7868 Tbg setting date: 02/24/2012 Packer Depth: _____

Reason for Non-Production:

Date formation Abandoned: _____ Squeeze: ☐ Yes ☐ No If yes, number of sacks cmt _____

Bridge Plug Depth: _____ Sacks cement on top: _____

Comment:

Payadd work was done on this well from 12/7/11 - 4/4/12.

I hereby certify all statements made in this form are, to the best of my knowledge, true, correct, and complete.

Signed: _____ Print Name: Joan Proulx

Title: Regulatory Analyst Date: _____ joan_proulx@oxy.com

Email
:

Attachment Check List

Att Doc Num	Name

Total Attach: 0 Files

General Comments

<u>User Group</u>	<u>Comment</u>	<u>Comment Date</u>

Total: 0 comment(s)